

STATE OF NEW MEXICO - 2012 TAX YEAR

Application Form
Revised 2011

APPLICATION-LIMITATION ON
INCREASE IN VALUE FOR SINGLE
FAMILY DWELLINGS OCCUPIED BY
LOW INCOME OWNERS 65 YEARS OF
AGE OR OLDER OR DISABLED

Pursuant to 7-36-21.3 NMSA 1978
as Amended in 2008

INSTRUCTIONS ON REVERSE SIDE
PLEASE READ CAREFULLY

County Name	County Assessor's Phone Number	Tax Year
Applicant's First Name	Middle Initial	Last Name
Present Mailing Address (Number & Street, P. O. Box or Rural Route)		
City & State	Zip Code	Phone Number
Driver's License or Personal ID Certificate (Number & State)		Date of Birth

Part 1Physical Address / Legal Description of PropertyUniform Property Code (UPC):

A. Is the property the applicant's primary residence?

YES

NO

B. Is the property occupied by the applicant and is he or she the current owner?

YES

NO

C. Will the applicant be age 65 or over during the current tax year?

YES

NO

D. Is the applicant disabled?

YES

NO

Part IIEnter "Modified Gross Income", all income received by the applicant, applicant's spouse and dependants.
Please see section 7-2-2 (L) of the Income Tax Act.

1. Compensation;

2. Net profit from business;

3. Gains from dealings in property;

4. Interest;

5. Net rents;

6. Royalties

7. Dividends;

8. Alimony and separate maintenance payments;

9. Annuities;

10. Income from life insurance and endowment contracts;

11. Pensions;

12. Discharge of indebtedness;

13. Distributive share of partnership income;

14. Income in respect of a decedent;

15. Income from an interest in an estate or trust;

16. Social Security benefits;

17. Unemployment compensation benefits;

18. Workers' compensation benefits;

19. Public assistance and welfare benefits;

20. Cost-of living allowances; and

21. Gifts;

Total Modified Gross Income (Add lines 1 thru 21.)

(Round to nearest whole dollar amount.)

Gross Annual Income

1

.00

2

.00

3

.00

4

.00

5

.00

6

.00

7

.00

8

.00

9

.00

10

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11

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12

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13

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16

.00

17

.00

18

.00

19

.00

20

.00

21

.00

.00

.00

Part IIIVALUATION LIMITATION - (To be completed by the County Assessor)

Qualifies

Does not qualify

The records of _____ County indicate the property value is \$ _____ as reflected on the _____ (Date) Notice of Value.

Valuation Limitation Authorized by: _____ Date: _____

Part IVCERTIFICATION BY PROPERTY OWNER - (To be signed by Applicant)

I certify that I am the legal owner of this property, I am living on this property and the income and age statements made are true and accurate. I understand that false statements made intentionally on this application may be penalized as provided for in 7-38-92 and 7-38-93 of the Property Tax Code.

Amended income tax returns shall be reported within 30 days of filing.

Applicant Signature: _____ Date: _____